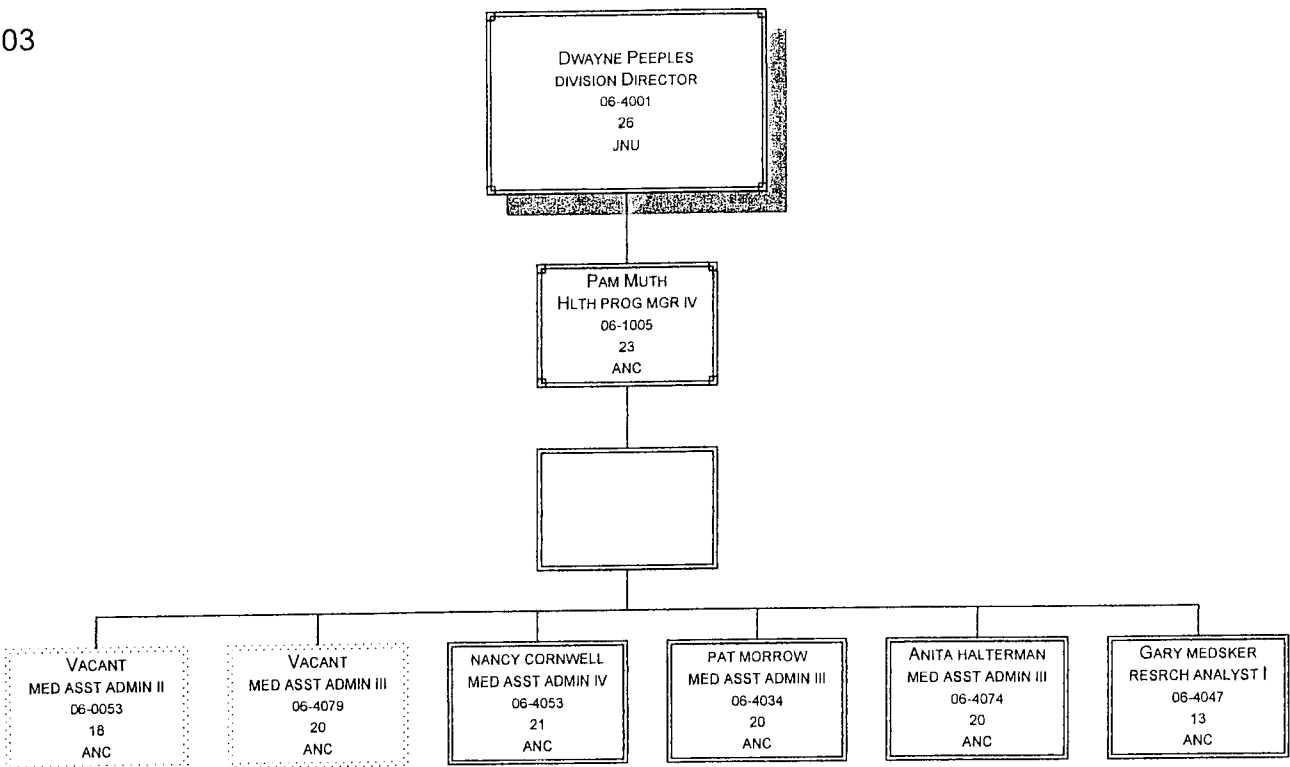


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Facility Services



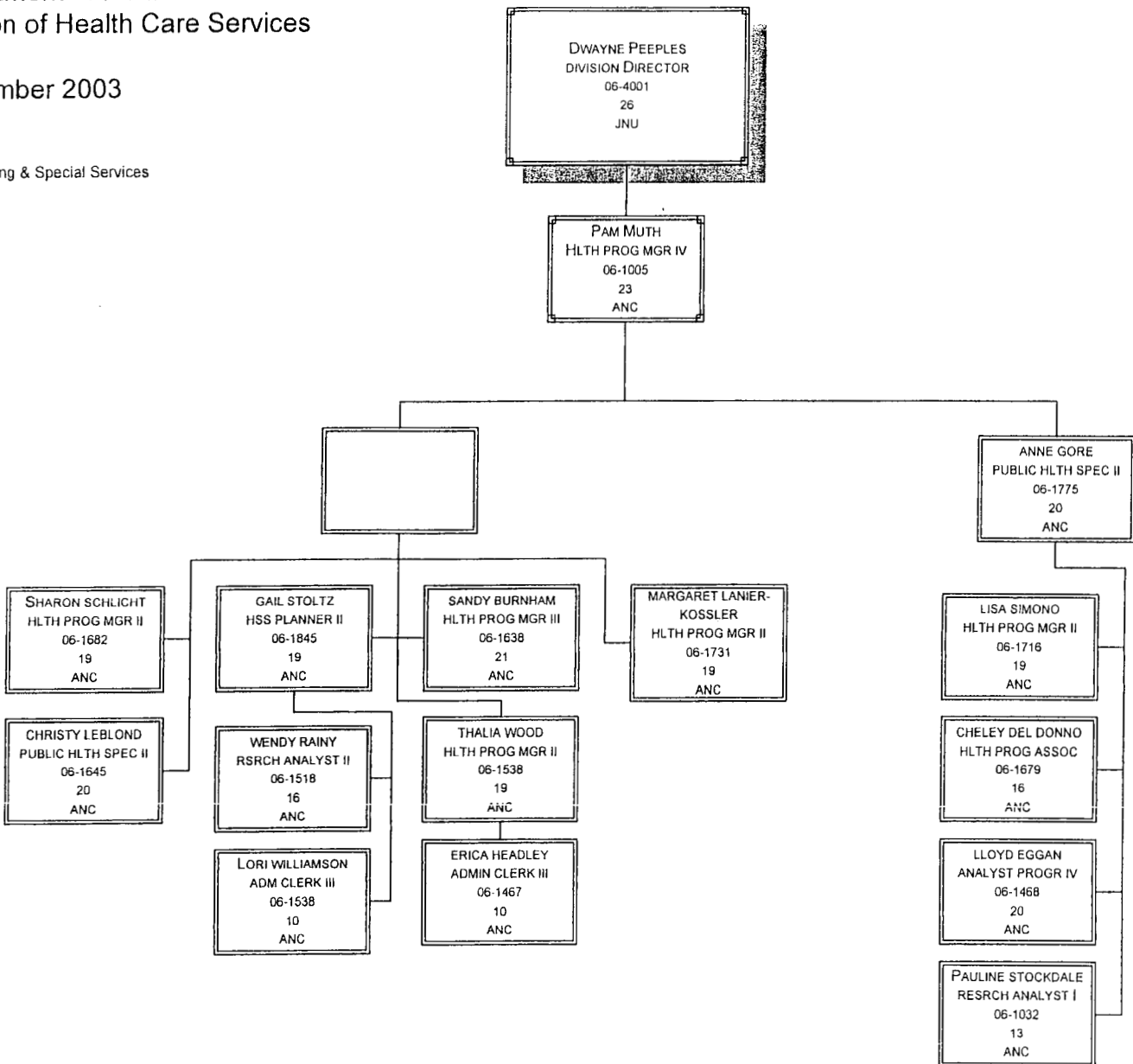
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Screening & Special Services

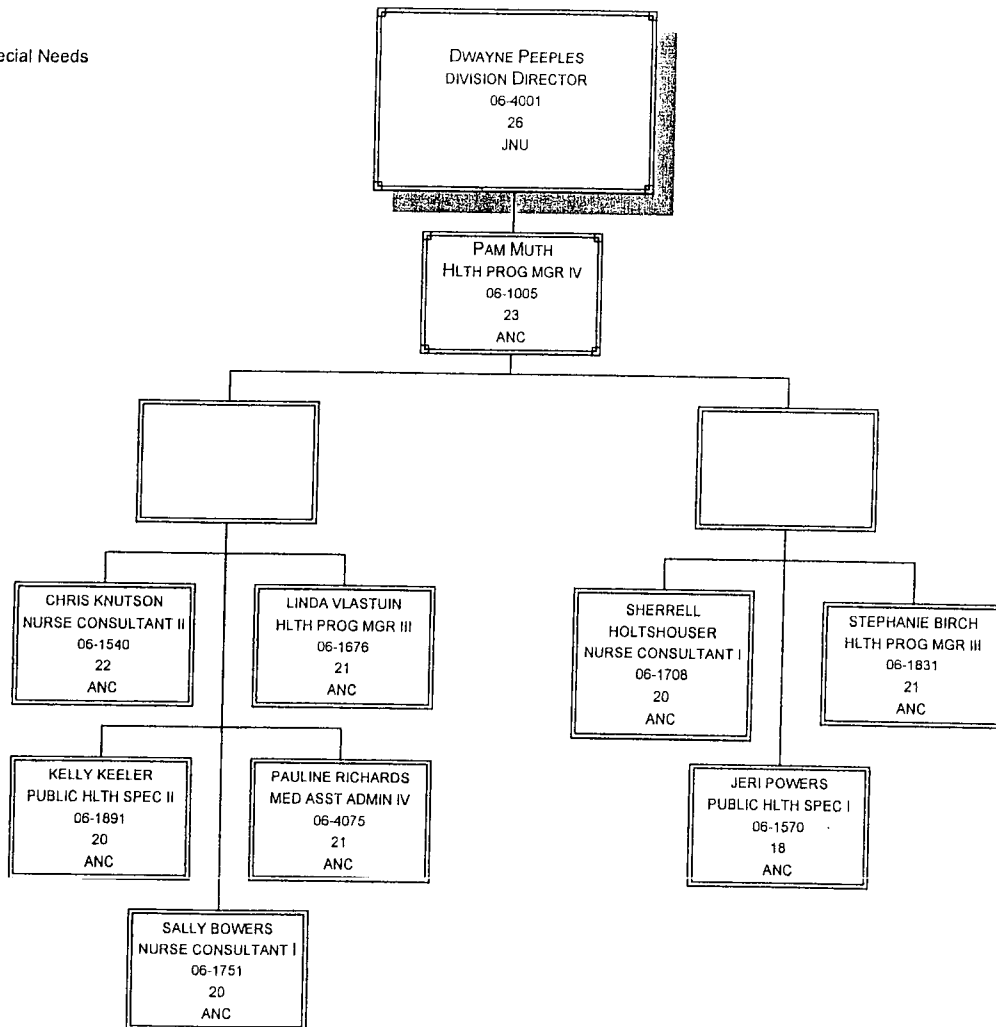


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Perinatal/Pediatrics/Children with Special Needs

Women/Adults/Elderly/Disabled



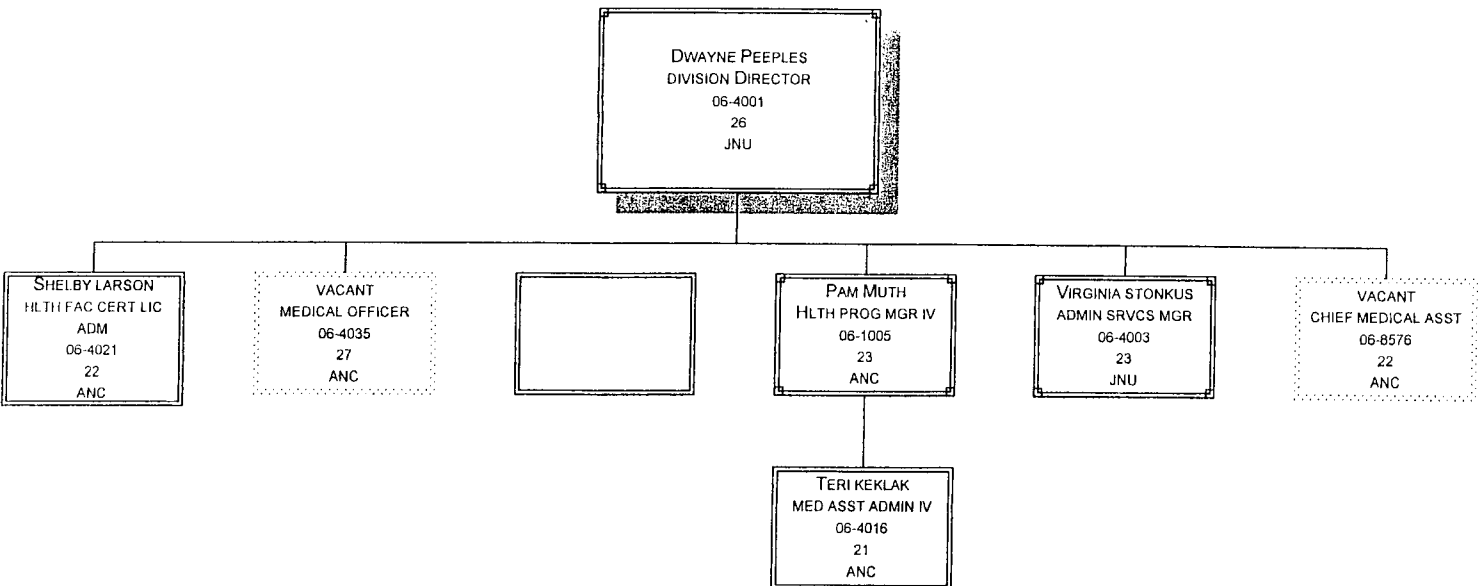
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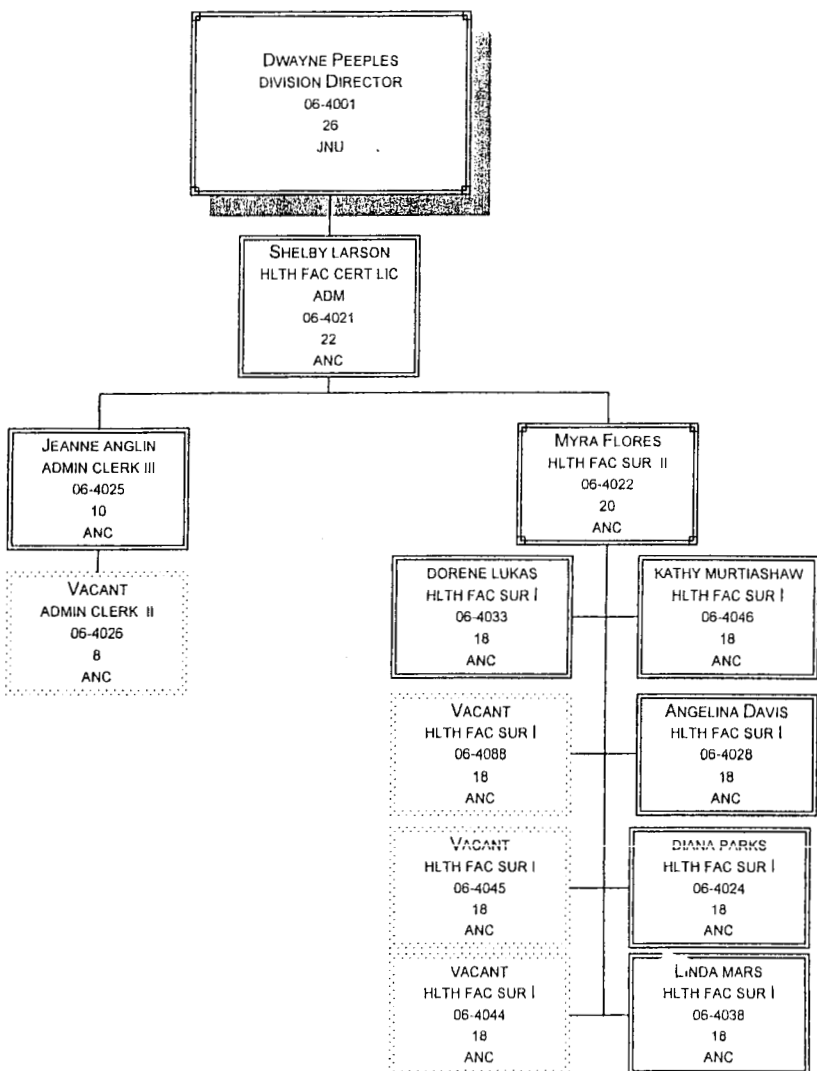
Management Reporting



Department of Health & Social Services  
Division of Health Care Services

September 2003

Certification & Licensing



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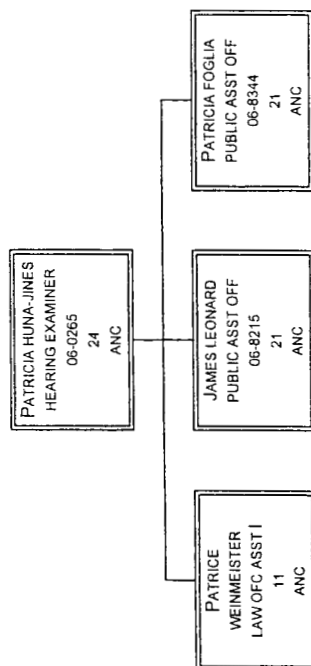
**FEB 19 2004** Effective Date July 1, 2003

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Department of Health & Social Services  
Division of Health Care Services

September 2003

Office of Hearings & Appeals



Office of Hearings & Appeals reports to the DHSS Deputy Commissioner

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ORGANIZATION AND FUNCTIONS OF THE DIVISION RESPONSIBLE FOR THE MEDICAL  
ASSISTANCE PROGRAM UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

The Division of Health Care Services has primary responsibility for administering the Title XIX, Title XXI and Chronic and Acute Medical Assistance programs and is the designated medical assistance unit. Health Care Services works closely with the Social Security Administration and other agencies within the Department in managing the Medicaid program to ensure quality personal health care services are delivered to Alaskans in need. The Office of Children's Services, and the Divisions of Public Assistance, Public Health, Behavioral Health, and Senior and Disability Services, also have responsibility for managing specific aspects of the Medicaid program. Agency-specific program management responsibilities are explained below.

Department of Health and Social Services (DHSS) Commissioner's Office:

includes three units with separate responsibilities for various aspects of the medical assistance program.

- Office of Program Review coordinates the Medicaid State Plan across the various Divisions and verifies and transmits necessary state plan amendments.
- Office of Rate Review is charged with advising the department on policies relating to payment rates for health facilities; reviewing the department's regulations on payment rates; recommending alternative rate-setting systems if necessary; and advising the department on the state plan as it relates to health facilities.
- Office of Hearings and Appeals conducts impartial client, provider, and health facility rate appeals, including those relating to Medical Assistance.

Division of Behavioral Health manages all policy, program and administrative functions relating to financing community-based mental health care, inpatient psychiatric care, community-based substance abuse treatment, and residential psychiatric treatment centers.

Division of Public Assistance has all policy program and administrative responsibility for health care eligibility policy development and compliance, and performs eligibility determinations.

Division of Public Health manages the Certificate of Need program and all health-planning functions. It is also responsible for all health care facilities staff licensing, complaint investigations, institutional utilization control, and federal certifications under Title XVIII and XIX. In addition, Public Health performs screening and diagnostic tests for infectious diseases for all Alaska health care providers serving Medicaid-eligible clients and performs blood lead screening, testing and monitoring. This Division also offers screening, diagnosis, and prevention services to identify and treat Tuberculosis, AIDS, sexually transmitted diseases, and vaccinations to prevent the occurrence of bacterial meningitis.

Division of Senior and Disabilities Services manages all policy, program and administrative functions relating to financing home and community-based waiver services, nursing facilities and personal care attendant services. This includes eligibility; provider recruitment, qualification and relations; accounting functions; and acting as liaison functions with the other state agencies.

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Office of Children's Services is the state's child protection agency and administers all state and federal foster care and adoption programs, including all Title IV-E program and administrative functions. It also manages the Infant Learning Program, Healthy Families Program, all behavioral rehabilitation services and WIC.

Division of Health Care Services has programmatic, administrative and financial responsibility for all other provider services, facility services, infant screening and testing, EPSDT, Breast and Cervical Cancer Screening and family planning programs. It is responsible for establishing, coordinating, and maintaining methods and systems to ensure program and provider compliance with all applicable state and federal statutes, regulations, guidelines, and objectives and quality assurance for the entire program.

The Director is charged with primary administration of the Medicaid and Chronic and Acute Medical Assistance Programs and is responsible for planning, policy development and implementation, assuring compliance with state and federal laws, analysis and management of the budget, problem solving, and legislative interface on behalf of the administration.

The organization of the Division is divided between two functional areas that have responsibilities affecting the entire Division's administration of Alaska's Medicaid Program:

### **I. Program Development Section**

Each of the three units outlined below operate as independent teams, developing policy and procedures within applicable state and federal statutes and regulations in each area of coverage. Staff in each unit includes policy specialists, research analysts, systems analysts, clinical specialists and administrative support

- **Provider Services Unit** includes durable medical equipment, pharmacy, audiology, infusion, orthotics, prosthetics, nutrition, dental, chiropractic, X-ray, vision, OT/PT/SL, labs and podiatry.
- **Facility Services Unit** deals with hospitals, home health care, ambulatory surgical centers, Federally Qualified Health Centers, rural health and hospice programs.
- **Screening and Special Services Unit** administers family planning, genetic and newborn screening, EPSDT, children's health programs, breast and cervical cancer, statewide specialty clinics, school-based services, case management, transportation and public health nursing programs.

Each unit has overall responsibility for planning and development of program and policy and its implementation. The units also have primary responsibility for their own policy initiatives, including any large-scale changes to the health care system, while ensuring consistency in health policy interpretation and continued access to quality care for beneficiaries. Specific responsibilities/authorities of each unit include:

- Implementing reimbursement changes;
- Maintaining state policy expertise that supports administration of the medical assistance programs within applicable state and federal statutes and regulations regarding coverage;
- Developing regulations and providing information to update the State Plan;
- Approving authorization and clinical criteria for all services and procedure coverage and

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- determining service review criteria and practice guidelines for service provision;
- Establishing criteria for provider participation and managing the reimbursement system and rate setting methodology to support program areas;
  - Improving program performance by reviewing industry changes related to reimbursement and health care delivery systems and developing appropriate regulatory/operational upgrades;
  - Coordinating services and fostering networks between stakeholders, e.g., community groups, advisory boards, collateral state agencies, other states, local representatives, and the public.

## **II. Interdivisional Management Services**

This section contains four units: Fiscal Recovery, Medicaid Management Information System (MMIS), Program Integrity, Business/Management Support to provide data, fiscal analysis, quality assurance, and administrative support for the entire Medical Assistance Program as well as the individual Program Development units. Staff in each Management unit includes policy specialists, research analysts, budget analysts, systems analysts, clinical specialists and administrative support.

- **Fiscal Recovery Unit** is responsible for oversight of the Division's financial services and third party recoveries including the areas of estate planning, collections, rebates and third party liability tracking
- **MMIS and Decision Support** manages and maintains the claims processing system for the medical assistance program, including all analysis and required state and federal reporting to ensure timely and accurate provider claims processing and payment.
- **Program Integrity** provides quality assurance through auditing and surveillance utilization review activities that prevent and identify fraud and abuse and ensure federal regulatory compliance.
- **Business/Management Support Unit** includes information technology support and maintenance fiscal analysis, planning and budget development, regulation development oversight and coordination, legislative liaison activities, communication and public information services, personnel management, technical assistance with grants and contracts, and administrative support.

## **Collateral Agency Roles**

Medical Care Advisory Committee is established in accordance with federal regulations and functions in an advisory capacity for the medical assistance program.

Department of Law, through an agreement with the Department of Health and Social Services, conducts fraud investigations for all assistance programs. The Health Care Services Program Integrity unit, through their quality assurance and audit activities, develops fraud referrals for the Medicaid Fraud Control Unit within the Department of Law.

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**PROFESSIONAL MEDICAL STAFF**

| Title   | FTE | Responsibilities   |
|---|-----|--|
| Pharmacy Program Manager                        | 1   | Manages pharmacy and DME program and policy; provides clinical expertise and oversight; monitors medical equipment and supply coverage and pricing.  |
| Administrative Clerk III                        | 1   | Clerical and administrative support exclusive to pharmacy and DME program manager.   |
| Medical Assistance Administrator I              | 1   | Manages recipient and provider relations; resolves coverage and payment issues.  |
| Medical Assistance Administrator II             | 3   | Audit and recovery unit (2 FTE) and management of DME program monitoring medical equipment and supply coverage and pricing (1 FTE).  |
| Medical Assistance Administrator IV             | 1   | Practitioner relations program and policy development; coverage and fee schedule dispute resolution and technical assistance for the Practitioner Relations Unit.  |
| Nurse Consultant I                              | 1   | Review SURS activity; post-payment review; assists with audits.  |
| Medical Assistance Administrator III            | 1   | Manage day-to-day operations of OA and APD waiver authorization units including LTC authorizations for nursing homes, Medicaid waiver provider certifications, and recipient and provider issue resolution and technical assistance.   |
| Medical Assistance Administrator II             | 4   | Responsible for eligibility, provider recruitment, provider relations, relations with other state agencies, and accounting functions necessary to support the state's OA and APD waivers. Includes certification and recertification of statewide OA and APD Medicaid waiver providers, LTC providers; level of care evaluations, assessments and authorizations; rate evaluation; provider and recipient dispute resolution and technical assistance to providers; fair hearings. |
| Medical Assistance Administrator I              | 1   | Approve/deny specific OA and APD Medicaid waiver services for recipients statewide; technical assistance and support to agencies/recipients.   |
| Developmental Disability Program Specialist III | 2   | Responsible for eligibility, provider recruitment, provider relations, relations with other state agencies, and accounting functions necessary to support the state's CCMC and DD waivers. Includes direct support and technical assistance to agencies, recipients, State regional offices, with supervisory oversight for in the administration and management of the  |

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|   |   |  |
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|   |   | CCMC and DD waiver programs. Provides support and technical assistance to agencies, recipients, and Department staff.  |
| Developmental Disability Program Specialist I               | 2 | Assist in the administration and oversight of the statewide DD and CCMC waiver programs.   |
| Program Coordinator   | 1 | Assist in the administration and oversight of the statewide DD and CCMC waiver programs.   |
| Health Facilities Certification and Licensing Administrator | 1 | Administers responsibility for all health care facilities staff licensing and federal certifications under Title XVIII and XIX, complaint investigations and institutional utilizations control. |
| Health Facilities Licensing Surveyor II                     | 1 | Directly responsible for conducting facility surveys, inspection of care reviews, and complaint investigations.  |
| Health Facilities Licensing Surveyor I                      | 8 | Directly responsible for conducting facility surveys, inspection of care reviews, and complaint investigations.  |
| Administrative Clerk III                                    | 1 | Directly support HFCL staff.   |
| Mental Health Clinician II                                  | 1 | Responsible for program evaluation; facility evaluation; ensuring proper prior authorization of Mental Health services; technical assistance to providers, recipients and contractors.           |
| Administrative Assistant                                    | 1 | Directly supports the Mental Health Clinician activities.  |